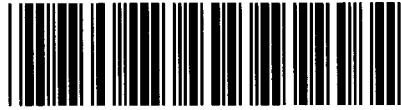


Control Number: 43704




Item Number: 185

Addendum StartPage: 0

43704 ✓

SAP 6545 8-13-14 CO

| | | | |
|---|---|---|--|
|  Texas Commission on Environmental Quality Registration of Submetered OR Allocated Utility Service | | This Box for TCEQ Use Only Registration No. S 6545 Date: 8-13-14 By DK | |
| This Box for TCEQ Use Only | | | |
| CUSTOMER REFERENCE NUMBER | | REGULATED ENTITY REFERENCE NUMBER | |
| CN(9 digits) | | RN(9 digits) | |
| Send a completed Core Data Form (TCEQ-10400) with this registration. | | | |
| PROPERTY OWNER (Customer on TCEQ-10400) | | | |
| Name | Brandon Corporation | | |
| Do not enter the name of the owner's contract manager, management company, or billing company. | | | |
| NAME AND TYPE OF PROPERTY WHERE UTILITY SERVICE IS PROVIDED (Regulated Entity on TCEQ-10400) | | | |
| Name | The Fountains of Tomball | | |
| <input checked="" type="checkbox"/> Apartment Complex | <input type="checkbox"/> Condominium | <input type="checkbox"/> Manufactured Home Rental Community | <input type="checkbox"/> Multiple-Use Facility |
| If applicable, describe the "multiple-use facility" here | | | |
| INFORMATION ON UTILITY SERVICE | | | |
| Tenants are billed for | <input type="checkbox"/> Water | <input type="checkbox"/> Wastewater | <input type="checkbox"/> Submetered OR <input checked="" type="checkbox"/> Allocated *** |
| Name of utility providing water/wastewater | | | |
| Date submetered or allocated billing begins (or began) | 08-01-14 | | Required |
| METHOD USED TO OFFSET CHARGES FOR COMMON AREAS Check one line only. | | | |
| <input type="checkbox"/> Not applicable, because | <input type="checkbox"/> Bills are based on the tenant's actual submetered consumption | | |
| | <input type="checkbox"/> There are neither common areas nor an installed irrigation system | | |
| <input checked="" type="checkbox"/> | All common areas and the irrigation system(s) are metered or submetered. | | |
| We deduct the actual utility charges for water and wastewater to these areas then allocate the remaining charges among our tenants. | | | |
| <input type="checkbox"/> | This property has an installed irrigation system that is <u>not</u> separately metered or submetered. | | |
| We deduct <input type="text"/> percent (we deduct at least 25 percent) of the utility's total charges for water and wastewater consumption, then allocate the remaining charges among our tenants. | | | |
| <input type="checkbox"/> | This property has an installed irrigation system(s) that is/are separately metered or submetered. | | |
| We deduct the actual utility charges associated with the irrigation system(s), then deduct at least 5 percent of the utility's total charges for water and wastewater consumption, then allocate the remaining charges among our tenants. | | | |
| <input type="checkbox"/> | This property does <u>not</u> have an installed irrigation system. | | |
| We deduct at least 5 percent of the retail public utility's total charges for water and wastewater consumption, and then allocate the remaining charges among our tenants. | | | |
| *** IF UTILITY SERVICES ARE ALLOCATED, YOU MUST ALSO COMPLETE PAGE TWO OF THIS FORM *** | | | |
| Send BOTH this form 10363 and the TCEQ Core Data 10400 form by fax to: 512/239-6972 | | OR By mail to: TCEQ, Utilities & Districts Section, MC 153 PO Box 13087 Austin, TX 78711-3087 | |
| If you need help completing this form, call the Utilities & Districts Section at 512-239-4691. Additional information about submetering and allocation billing is available at the following Website: | | | |
| If you need help completing the Core Data Form call our Central Registry Program at 512-239-5175 or visit the following Website: | | | |

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 TCEQ UTILITIES & DISTRICTS SECTION

1 <http://www.tceq.texas.gov/utilities/submeter.html>
 2 http://www.tceq.texas.gov/permits/central_registry/

METHOD USED TO ALLOCATE UTILITY CHARGES

Check the box or boxes that describe the allocation method used to bill tenants.
 Occupancy method. The number of occupants in the tenant's dwelling unit is divided by the total number of occupants in all dwelling units at the beginning of the month for which bills are being rendered.

Ratio occupancy method:

The number of occupants in the tenant's dwelling unit is adjusted as shown in the table to the right. This adjusted value is divided by the total of these values for all dwelling units occupied at the beginning of the retail public utility's billing period.

| Number of Occupants | Number of Occupants for Billing Purposes |
|---------------------|--|
| 1 | 1.0 |
| 2 | 1.6 |
| 3 | 2.2 |
| >3 | 2.2 + 0.4 for each additional occupant |

Estimated occupancy method

The estimated occupancy for each unit is based on the number of bedrooms as shown in the table to the right. The estimated occupancy in the tenant's dwelling unit is divided by the total estimated occupancy in all dwelling units regardless of the actual number of occupants or occupied units.

| Number of Bedrooms | Number of Occupants for Billing Purposes |
|--------------------|--|
| 0 (Efficiency) | 1 |
| 1 | 1.6 |
| 2 | 2.8 |
| 3 | 4.0 |
| >3 | 4.0 + 1.2 for each additional bedroom |

Occupancy and size of rental unit percent (in which no more than 50%) of the utility bill for water/wastewater consumption is allocated using the occupancy method checked above. The remainder is allocated according to either:

- the size of the tenant's dwelling unit divided by the total size of all dwelling units. OR
- the size of the space rented by the tenant of a manufactured home divided by the size of all rental spaces.

Submetered hot water:
 The individually submetered hot water used in the tenant's dwelling unit is divided by all submetered hot water used in all dwelling units.

Submetered cold water is used to allocate charges for hot water provided through a central system:
 The individually submetered cold water used in the tenant's dwelling unit is divided by all submetered cold water used in all dwelling units.

As outlined in the condominium contract. Describe:

Size of manufactured home rental space:
 The size of the area rented by the tenant divided by the total area of all the size of rental spaces.

Size of the rented space in a multi-use facility:
 The square footage of the space rented by the tenant divided by the total square footage of all rental spaces.



TCEQ Core Data Form

TCEQ Use Only

For detailed instructions regarding completion of this form, please read the Core Data Form Instructions or call 512-239-5175

SECTION I: General Information

1 Reason for Submission (If other is checked please describe in space provided)

New Permit, Registration or Authorization (Core Data Form should be submitted with the program application)

Renewal (Core Data Form should be submitted with the renewal form) Other

2 Attachments Describe Any Attachments: (ex Title V Application Waste Transporter Application, etc)

Yes No RUBS Utility Service

3 Customer Reference Number (if issued) CN

4 Regulated Entity Reference Number (if issued) RN

Follow this link to search for UH or RN numbers in Central Registry**

SECTION II: Customer Information

5 Effective Date for Customer Information Updates (mm/dd/yyyy)

6 Customer Role (Proposed or Actual) - as it relates to the Regulated Entity listed on this form Please check only one of the following:

Owner Operator Owner & Operator Voluntary Cleanup Applicant Other

Occupational Licensee Responsible Party

7 General Customer Information

New Customer Update to Customer Information Change in Regulated Entity Ownership No Change**

Change in Legal Name (Verifiable with the Texas Secretary of State)

**If "No Change" and Section I is complete, skip to Section III - Regulated Entity Information.

8 Type of Customer:

Corporation Individual Sole Proprietorship- D.B.A

City Government County Government Federal Government State Government

Other Government General Partnership Limited Partnership Other

9 Customer Legal Name (If an individual, print last name first: ex Doe, John) Benadam Corporation

If new Customer, enter previous Customer below

End Date

10 Mailing Address: The Fountains of Tomball

1011 Village Square Drive

City Tomball State TX ZIP 77375 ZIP + 4

11 Country Mailing Information (If outside USA)

12 E-Mail Address (if applicable)

13 Telephone Number (281) 351-2244

14 Extension or Code

15 Fax Number (if applicable)

16 Federal Tax ID (9 digits)

17 TX State Franchise Tax ID (11 digits) 19110050093

18 DUNS Number (if applicable)

19 TX SOS Filing Number (if applicable) 9790306

20 Number of Employees 0-20 21-100 101-250 251-500 501 and higher

21 Independently Owned and Operated? Yes No

SECTION III: Regulated Entity Information

22 General Regulated Entity Information (If "New Regulated Entity" is selected below this form should be accompanied by a permit application)

New Regulated Entity Update to Regulated Entity Name Update to Regulated Entity Information No Change** (See below)

**If "NO CHANGE" is checked and Section I is complete, skip to Section IV, Preparer Information.

23 Regulated Entity Name (name of the site where the regulated action is taking place)

Benadam Corp The Fountains of Tomball

| | | | | | | | |
|--|----------------------------------|---------------------------------------|-------------------------------|---|-------|---------|--|
| 24 Street Address of the Regulated Entity (No P.O. Boxes) | The Fountains of Tomball | | | | | | |
| | 1011 Village Square Drive | | | | | | |
| City | Tomball | State | TX | ZIP | 77375 | ZIP + 4 | |
| 25 Mailing Address: | The Fountains of Tomball | | | | | | |
| | 1011 Village Square Drive | | | | | | |
| City | Tomball | State | TX | ZIP | 77375 | ZIP + 4 | |
| 26 E-Mail Address: | | | | | | | |
| 27 Telephone Number | 28 Extension or Code | | 29 Fax Number (if applicable) | | | | |
| (281) 351-2244 | | | () | | | | |
| 30 Primary SIC Code (4 digits) | 31 Secondary SIC Code (4 digits) | 32 Primary NAICS Code (5 or 6 digits) | | 33 Secondary NAICS Code (5 or 6 digits) | | | |
| 6513 | | 53110 | | | | | |
| 34. What is the Primary Business of this entity? (Please do not repeat the SIC or NAICS description) | | | | | | | |
| Apartments | | | | | | | |

Questions 34 - 37 address geographic location. Please refer to the Instructions for applicability.

| | | | | | | | |
|---------------------------------------|---------|------------------------------|--------|---------|------------------|--|--|
| 35. Description to Physical Location: | | | | | | | |
| 36 Nearest City | County | | State | | Nearest ZIP Code | | |
| Tomball | Harris | | TX | | 77375 | | |
| 37. Latitude (N) In Decimal | | 38. Longitude (W) In Decimal | | | | | |
| Degrees | Minutes | Seconds | Degree | Minutes | Seconds | | |
| | | | | | | | |

39. TCEQ Programs and ID Numbers Check all Programs and write in the permit/registration numbers that will be affected by the updates submitted on this form or the updates may not be made. If your Program is not listed, check other and write it in. See the Core Data Form instructions for additional guidance

| | | | | |
|--|--|---|---|--|
| <input type="checkbox"/> Dam Safety | <input type="checkbox"/> Districts | <input type="checkbox"/> Edwards Aquifer | <input type="checkbox"/> Industrial Hazardous Waste | <input type="checkbox"/> Municipal Solid Waste |
| <input type="checkbox"/> New Source Review - Air | <input type="checkbox"/> OSSF | <input type="checkbox"/> Petroleum Storage Tank | <input type="checkbox"/> PWS | <input type="checkbox"/> Sludge |
| <input type="checkbox"/> Stormwater | <input type="checkbox"/> Title V - Air | <input type="checkbox"/> Tires | <input type="checkbox"/> Used Oil | <input type="checkbox"/> Utilities |
| <input type="checkbox"/> Voluntary Cleanup | <input type="checkbox"/> Waste Water | <input type="checkbox"/> Wastewater Agriculture | <input type="checkbox"/> Water Rights | <input type="checkbox"/> Other |

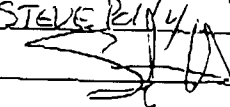
SECTION IV: Preparer Information

| | | |
|----------------------|---------------|----------------|
| 40. Name: | 41 Title | |
| 42. Telephone Number | 43. Ext./Code | 44. Fax Number |
| () | () | () |
| 45 E-Mail Address | | |

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 9 and/or as required for the updates to the ID numbers identified in field 39.

(See the Core Data Form instructions for more information on who should sign this form.)

| | | | |
|--|---|------------|------------------|
| Company: | The Tipton Group | Job Title: | Regional Manager |
| Name (in Print) | STEVE PELLY | Phone: | () |
| Signature: |  | Date: | 8.5.14 |
| Supervisor for the Tipton Group managing Agent for Brandon Corp. | | | |